

## Certificate of Registration



This Certificate issued under the seal of the Copyright Office in accordance with title 17, United States Code, attests that registration has been made for the work identified below. The information on this certificate has been made a part of the Copyright Office records.

*Margbeth Peters*

Register of Copyrights, United States of America



Form TX

For a Nonperiodic Literary Work  
UNITED STATES COPYRIGHT OFFICE

TX 5-918-974

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MAY 10 2004

EFFECTIVE DATE OF REGISTRATION

APR 29 2004

Month Day Year

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

1

## TITLE OF THIS WORK

God's Plan for Marriage and Family - Mothers of Young Children  
Animator's Handbook Year 1

## PREVIOUS OR ALTERNATIVE TITLES

PUBLICATION AS A CONTRIBUTION If this work was published as a contribution to a periodical, serial, or collection, give information about the collective work in which the contribution appeared. Title of Collective Work

If published in a periodical or serial give Volume Number Issue Date On Pages

2

## NAME OF AUTHOR

a Paul Ernest Sellors

Was this contribution to the work a  
work made for hire?  
☐ Yes  
☒ No

## AUTHOR'S NATIONALITY OR DOMICILE

OR  
Citizen of: USA  
Domiciled in:

## DATES OF BIRTH AND DEATH

Year Born: 1943 Year Died:

## WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK

Anonymous? ☒ Yes ☐ No

Pseudonymous? ☐ Yes ☒ No

If the answer to either of these questions is "Yes," see detailed instructions.

NATURE OF AUTHORSHIP Briefly describe nature of material created by this author in which copyright is claimed.

Co-authored entire work

## NAME OF AUTHOR

b Elizabeth Mary Sellors

Was this contribution to the work a  
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☐ Yes  
☒ No

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OR  
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Domiciled in:

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## NAME OF AUTHOR

c

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☐ Yes  
☒ No

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Domiciled in:

## DATES OF BIRTH AND DEATH

Year Born: Year Died:

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Pseudonymous? ☐ Yes ☒ No

If the answer to either of these questions is "Yes," see detailed instructions.

NATURE OF AUTHORSHIP Briefly describe nature of material created by this author in which copyright is claimed.

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## YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED

1994

## DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK

Complete this information only if this work has been published. Month: 9 Day: 1 Year: 92

4

COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2.

Paul Ernest Sellors  
Elizabeth Mary Sellors  
3205 Roosevelt Street NE  
Minneapolis, MN 55418

TRANSFER If the claimant(s) stated here in space 4 is (are) different from the author(s) stated in space 2, give a brief statement of how the claimant(s) obtained ownership of the copyright.

APPLICATION RECEIVED

APR 29 2004

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TWO DEPOSITS RECEIVED

APR 29 2004

FUNDS RECEIVED

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Complete all applicable spaces (numbers 1-4) on the reverse side of this page.  
See detailed instructions. Sign the form at the bottom.

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Page 1 of 2 pages

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FORM TX

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CORRESPONDENCE

☒ YesFOR  
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ONLY

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PREVIOUS REGISTRATION Has registration for this work or for an earlier version of this work, already been made in the Copyright Office?

☐ Yes ☒ No If your answer is Yes why is another registration being sought? (Check appropriate box) ✓a ☐ This is the first published edition of a work previously registered in unpublished formb ☐ This is the first application submitted by the author as copyright claimantc ☐ This is a changed version of the work, as shown by space 6 on this application

If your answer is Yes give Previous Registration Number &gt;

Year of Registration &gt;

5

DERIVATIVE WORK OR COMPILATION

Formulating Material Identify any preexisting work or works that this work is based on or incorporates ✓

a

6

See Instructions  
before completing  
this space

b

Material Added to This Work Give a brief, general statement of the material that has been added to this work and on which copyright is claimed ✓

DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office give name and number of Account

Name ✓

Account Number ✓

a

7

CORRESPONDENCE Give name and address to which correspondence about this application should be sent Name/Address/Apt./City/State/ZIP ✓

David E. Krause, Esquire  
KRAUSE & ROLLINS, Chartered  
310 Groveland Avenue  
Minneapolis, MN 55403

First call and daytime telephone number &gt;

Fax number &gt;

Email &gt;

b

CERTIFICATION I, the undersigned, hereby certify that I am the

Check only one &gt;

☒ author☐ other copyright claimant☐ owner of exclusive right(s)☐ authorized agent of

Name of author or other copyright claimant, or owner of exclusive right(s) &gt;

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge

8

Typed or printed name and date ✓ If this application gives a date of publication in space 3 do not sign and submit it before that date

Paul Ernest Sellors, Elisabeth Mary Sellors

Date &gt; 4/14/04

Handwritten signature (X)

x *Paul Sellors* *Elisabeth Sellors*

Certificates will be mailed in window envelopes to this address

Name ✓

David E. Krause, Esq

Name/Address/Apt. ✓

310 Groveland Avenue

City/State/ZIP ✓

Minneapolis, MN 55403

Complete all information on reverse. Sign your application in space 8.

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